

ATTACHMENT "A-9"

State of California—Health and Welfare Agency
Form Approved OMB No 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on site (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's US EPA ID No <i>LIAHAD7614126664H</i>	Manifest Document No <i>111111111111</i>	2. Page 1 of / Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address DOMESTIC LINEN 1600 COMPTON BLVD		A. State Manifest Document Number 87247358		
4. Generator's Phone (213) 747-6226		B. State Generator's ID		
5. Transporter 1 Company Name DISPOSAL CONTROLLER		C. State Transporter's ID 353301		
7. Transporter 2 Company Name		D. Transporter's Phone 1800-824-3345		
9. Designated Facility Name and Site Address OMEGA RECOVERY 1250 N. W. WHITTER BLVD WILM T.R.C.H. 90602		E. State Transporter's ID		
10. US EPA ID Number <i>LGAD0103141184</i>		F. Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) WASTE FLAMMABLE LIQUID NOS N.C.S. UN. 1993 P.T.C. 8348		G. State Facility's ID CAAD042245001		
		12. Containers No	13. Total Quantity	14. Unit Wt/Vol
		<i>001</i>	<i>3500</i>	<i>6</i>
J. Additional Descriptions for Materials Listed Above T-XYLENE 66.3% TOLUENE 10.1% ETHYLBENZENE 3.28% 3.28% OXYLICENE 2.00% HEPTANE = 0.73.90		K. Handling Codes for Wastes Listed Above A. 01		
L. Special Handling Instructions and Additional Information WASTE 18% PROFILE NO. 17% MUD 2.58%		b. c. d.		
P.O.				
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.				
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.				
Printed/Typed Name <i>HARRY FRIERSON</i>		Signature <i>HARRY FRIERSON</i>		Month Day Year <i>11/01/2018</i>
R A N S P O T T E R 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <i>James</i>		Signature <i>James</i>		Month Day Year <i>10/22/2017</i>
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name <i>/</i>		Signature <i>/</i>		Month Day Year <i>/</i>
19. Discrepancy Indication Space				
JO. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <i>Eric J. Pittner</i>		Signature <i>Eric J. Pittner</i>		Month Day Year <i>/</i>

IN CASE OF AN ENVIRONMENTAL SPILL CALL THE NATIONAL RESPONSE CENTER 1 800 424-8802. WITHIN CALIFORNIA CALL 1 800-862-7550